**Osteoporosis:** Condition characterized by decrease in bone density, producing porous/fragile bones

**Metabolism**: Process by which your body gets energy from food

**Cardiorespiratory Endurance:** Ability of heart, lungs, and blood vessels to utilize and send fuel and oxygen to body’s tissues during long periods of moderate-to-vigorous activity personal fitness

**Body Composition:** Ratio of body fat to lean body tissues, including muscle,bone,water, and connective tissues such as ligaments,cartilage and tendons

**Aerobic Exercise:** Any activity that uses large muscle groups, rhythmic in nature and can be maintained continuously for a while

**Anaerobic Exercise:** Intense short bursts of activity in which muscles work so hard that they produce energy without using oxygen

**Progression:** Gradual increase in overlord necessary to achieve higher levels of fitness

**F.I.T.T:** Formula- frequency,intensity,time/duration and type of activity

**Cool Down:** Activity that prepares the muscles to return to a resting state

**Resting Heart Rate:** The number of times your heart beats in one minute when you are not active

*Chapter 7: Achieving Good Mental Health*

**Mental/Emotional Health:** Ability to accept yourself and others, adapt to and manage emotions, and deal with the demands and challenges you meet in life

Good Mental/Emotional Health

* Positive Self-Esteem : Sense of Purpose : Sense of Belonging
* Positive Outlook: Seeing the bright side and having hope about life reduces stress
* Autonomy: Having confidence to make responsible and safe decisions

**Maslow Hierarchy of Needs:** Ranked list of need essential to human growth and development, starting with basic needs and building towards the need for reaching your highest potential

Level 1 Physical: Need to satisfy basic needs of hunger,thirst,sleep and shelter

Level 2 Safety: Need to be secure from danger

Level 3 Belonging: Need to love and be loved, need to belong

Level 4 Feeling Recognized: Need to achieve, need to be recognized

Level 5 Reaching Potential: Need for self actualization

**Self Actualization:** Striving to be the best you can be

**Personal Identity:** Your sense of yourself as a unique individual

Contributions: Your interests/ Likes and dislikes/ Talents and abilities/ Values and beliefs/ Goals

Defense Mechanisms

**Suppression**: Conscious, intentional pushing of unpleasantness from one’s mind.

**Repression:** Involuntary pushing of unpleasant feelings out of conscious thought.

EX: A man has a phobia of spiders but cannot remember the first time he was afraid of them.

**Rationalization:** Making an excuse for a mistake or failure rather than taking responsibility for it.

**Regression:** Reverting to behaviors more characteristics of an earlier stage of development rather than dealing with the conflict in a mature manner.

**Compensation:** Making up for weaknesses/mistakes through gift giving, hard work or extreme efforts.

**Identification:** Identifying with someone you admire.

**Idolization:** Extreme identification; idol or hero worship, seeing someone else as perfect as and more worthy than everyone else. You can’t see or **deny** the person’s faults.

**Idealization:** Blinded by a particular concept or ideology and cannot look at it objectively. People will follow “blindly” without question.

**Daydreaming/escapism:** make believe to escape frustration/excessive reading, exercise etc… to avoid dealing with a problem or feeling.

**Reaction formation:** Expression of emotions that is the opposite of what you truly feel.

**Denial:** Unconscious lack of acknowledgement of something that is obvious to others.

**Displacement:** shifting the expression of feelings about one person onto another person (on the rebound from a dating standpoint **/** kicking the dog).

**Negativism:** *failing to try* because failing to try is better than trying and failing to one’s self-esteem.

**Sublimation:** Replacement of an undesirable outlet for energy by a desirable one.

EX: Person experiencing anger might take up kickboxing as a means of venting frustration.

**Conversion:** converting an unpleasant or emotional reaction to a physical one.

**Projection:** Attributing your own feelings or faults

EX: If you have a strong dislike for someone, instead you might believe that he does not like you

**Perception**: Act of becoming aware through the senses

**Stressor**: Anything that causes stress : *Biological***:** Illnesses, disabilities or injuries

*Environmental*:Poverty, pollution, crowding, noise or natural disasters

*Cognitive/thinking stressors:* Way you perceive a situation or how it affects you and world

*Personal behaviors*:Negative reactions in body and mind by using drugs or by lack of activity.

*Life Situation*: Death of a pet, separation, divorce, trouble in peer relationships.

**Psychological Fatigue:** Can result from constant worry, overwork,depression,boredom,isolation, or feeling overwhelmed by too many responsibilities

**Pathological Fatigue:** Tiredness brought on by overworking the body’s defenses in fighting disease. Anemia, the flu, being overweight, and poor nutrition can all bring on pathological fatigue, USe of drugs such as alcohol can intensify the feeling of fatigue

**Psychosomatic Response:** This is a physical reaction that results from stress rather than from an injury or illness,

**ALARM STAGE**

1. Begins when hypothalamus perceives a stress signal and releases hormone that acts on pituitary gland.
2. The pituitary secretes a hormone that stimulates the adrenal glands.
3. Adrenal glands secrete **adrenaline** that prepares the body to respond to a stressor. Also known as FIGHT OR FLIGHT.

**Physical Symptoms:** Pupils dilate, increase perspiration, heart rate, blood pressure, respiration, blood flow to the muscles and brain, digestions stops, release of fat, sugar, and cholesterol in the blood.

**Fatigue or Exhaustion Stage:** Result of prolonged stress, body loses its ability to adapt, tiredness lowers ability to manage other stressors and mind and body become exhausted.

* **Psychological Fatigue:** Constant worrying, overwork, depression, boredom, isolation, feeling overwhelmed by too many responsibilities. The most common type of fatigue.
* **Pathological Fatigue:** Anemia, flu, overweight,poor nutrition,drugs, alcohol, diseases.
* **Psychosomatic Response:***(physical)* headaches, asthma, hypertension, weakened immune system, upset stomach, ulcers, colitis and muscle aches, ringing in the ears. *Emotional/Mental-* difficulty concentrating, mood swings, increase risks of substance abuse, edginess frustration, losing a sense of humor and perspective, not eating, overeating, change in sleep patterns.
* **Chronic Fatigue Syndrome:** Persistent fatigue for at least 6 months, mild fever & sore throat, headaches & joint pain, muscle weaken and pain, sleep problems, difficulty thinking clearly, fatigue after light exercise.

**Ways to Manage Stress:** Change your perception, consider it an opportunity not a threat.

**Plan ahead-** think through a situation, what steps you should take, decide in advance what you want to accomplish.

* Get adequate sleep: Lack of sleep is a source of stress that will impair concentration
* Get regular physical activity: Activity reduces adrenaline which reduces stress.
* Eat nutritious food: Poor nutrition leads to pathological fatigue : Avoid drugs
* Develop and use coping and relaxation techniques.
* Get social support: Sharing feelings help you deal with stress. Use support groups

People may also be susceptible if they:

**Over-generalize**: Drawing a broad conclusion from one incident. Ex.Breaking up with a guy and saying no guys will like you/you’ll never find another.

**Personalization**: Act of taking a remark or incident too seriously and too personal.

**Resiliency:** Ability to adapt effectively and recover from disappointment, difficulty or crisis

**Factors that affect resiliency**

**External Factors:** Family, school or community, your peers. Can include elements like: Opportunities to participate in school projects or community events

**Internal Factors**: Ones you have control over. Making a conscious effort to strengthen these factors will increase resiliency and improve mental/emotional health. Your attitudes, perception and behaviors makeup your internal factors. Includes: **Commitment to Learning**

* **Positive Values:** Demonstrate positive values through your words and actions.By understanding the potential impact of commn risk behaviors and avoiding those behaviors, you sho that you take responsibility for your health
* **Social Competency**: Being socially competent means that you have empathy and friendship skills. It also means that you can resist negative peer pressure and resolve conflicts nonviolently
* **Positive Identity:** Gives you a sense of control over what happens to you. Indicates positive self esteem and a sense of purpose. You are likely to have a positive view of your future, an asset that allows you to recover more easily from setbacks

*Mental Disorders*: An illness of the mind that can affect the thoughts, feelings and behaviors of a person, preventing him or her from leading a happy, healthful, and productive life.

**Anxiety Disorder**: Condition in which real or imagined fears are difficult to control

**Manic Depression**: Extreme mood change, energy levels and behavior

**Antisocial Personality Disorder**: Tend to be irritable,aggressive,impulsive and violent

**Borderline Personality Disorde**r: Experience a series of troubled relationships

**Passive-aggressive Personality Disorder:** Uncooperative. Resent being told what to do, yet they rely on others direction. Angry over issues of control, they show their anger indirectly

**Obsessive-Compulsive Disorder**: Person trapped in pattern of repeated thoughts/behaviors.

**Obsessive:** Persistent and unwanted thoughts that prevent people from doing normal activities.

**Compulsive** : Repeated, irresistible behaviors

**Panic Disorder**: Person has sudden, unexplained feelings of terror.

Panic attacks accompanied by symptoms such as trembling. Pounding heart, shortness of breath, dizziness. May occur any time or place, most triggered by a particular object, condition,or situation.

**Post-Traumatic Stress Disorder**: Condition that develop after exposure to a terrifying event that threatened or caused physical harm. Common after assault, rape, natural, man-made disaster; 9/11.

*Symptoms* include flashbacks, nightmares, emotional numbness, sleeplessness, guilt, and problems with concentration. The disorders may arise weeks or months after the event that caused it.

**Mood Disorders**: Illness, often with an organic cause, that involves mood extremes that interfere with everyday living.

**Clinical Depression**: Depression that lasts for more than a few weeks includes feelings of sadness. Interferes with a person’s ability to concentrate, sleep, perform at school, work or handle everyday decisions and challenges. Results from a chemical imbalance that a person cannot overcome without professional help.Depression runs in families, sometimes it may be a symptom of substance abuse or addiction, as alcohol and other drugs can affect brain chemistry.

**Bipolar Disorder**: Manic-depressive disorder is marked by extreme mood changes, energy levels and behavior.Manic highs and depressive lows. Adults may behave normal between episodes but teens tend to alternate rapidly between the two extremes.

**Manic symptoms**: Excessive happy, silly, irritable, angry, agitated, feeling all-powerful and grandiose, no sleep for days, talks too much, high risk behavior, distractibility.

**Depressive symptoms**: Sadness, crying, preoccupation with death, loss of enjoyment, physical ailments, low energy, dramatic change in eating or sleeping habits

**Conduct Disorders: P**attern of behavior in which rights of others or social rules are violated.

EX: Lying, theft, aggression, violence, truancy, arson, and vandalism. It’s more common in males, and has low self-esteem. May suffer from anxiety, depression and substance abuse. Without treatment teens are unable to adapt to adulthood and problems will probably escalate

**Personality Disorders**: Think and behave in ways that make it difficult for them to get along with others; forming friendships. Difficult to treat EVEN with professional help!

**Antisocial Personality Disorder:** Often feel society’s rules don’t apply to them. They tend to be irritable, aggressive, impulsive, and **violent.** They are unable to show remorse for their behavior. May be outwardly charming but will stab you in the back. Often become criminals.

**Borderline Personality Disorder**: They frequently experience a series of troubled relationships. They tend to engage in high-risk activities, and many have poor self-esteem. Although they fear abandonment, they frequently lash out violently

**Passive-Aggressive Personality Disorder**: People with this disorder are often uncooperative. Resent being told what to do, yet they rely on others’ direction. Angry over issues of control, they show anger **ONLY** indirectly. Person is always late or fails to show up.

**Paranoid Personality Disorder**: Unfounded suspicion and mistrust of others. Their relationships may be damaged by their mistrust. Even after their suspicions are proved wrong.

**Compulsive Personality Disorder**: The person is constantly concerned with rules and standards. They often lack a sense of humor, cannot express warm loving emotions. They often insist that others do things their way. When they are unable to control others, they become angry. These people value work, and control above all else.

**Schizophrenia**: Severe mental disorder in which a person loses touch with reality.

Symptoms: Delusions, hallucinations, and thought orders. This condition may be a combination of genetic factors, chemical and structural changes in the brain. Usually appears between 15 and 35 years of age

**Dissociative Disorder:** People may forget who they are or think they are someone else. It is very rare but may result from extreme abuse or stress during early childhood.

**Multiple Personality Disorder:** Person has 2 or more separate and distinct personalities. “Central” personality usually does not know about other personalities until intense counseling.

**Amnesia**: Sudden inability to remember basic personal information. People with amnesia forget their names and where they live. May result from a head injury.

May last a few minutes to forever depending on the amount of brain damage.

**Somatoform Disorders**: Condition in which there are physical symptoms, but no physical illness.

**Hypochondria:** Is a strong belief that one is ill when illness is neither present nor likely.

They often complain about multiple pains that come and go.

**General Anxiety Disorder**: The person feels anxious, fearful and upset most of the time, but for no specific reason. This may eventually lead to a Panic Attack.

**Alienation:** Feeling isolated and separated from everyone else

*Strategies for suicide prevention*

**Initiate a meaningful Conversation**: Showing interest and compassion for a person is an important first step.. Listen closely to what that person sats; be understanding and patient

**Show support and ask questions**: Remind the person that most problems have solutions. Make it clear that you understand that the person wants to end his or her pan, but emphasize that suicide is not the answer. Share the fact that most suicide survivors later express gratitude that they did not die

**Try to persuade the person to seek help:** Encourage the person to talk with a parent, counselor,therapist, oro ther trusted adult. offer to go with the person to get help

*Mental disorders treatments*

**Psychoanalysis:** Analysis of unresolved conflicts a person’s early life. Unresolved conflicts will eventually manifest themselves in ways that are unhealthy.

**Psychotherapy:** Discussions which bring out real problem, understanding of it & possible solution.

**Biomedical (drug) therapy:** Use of drugs to treat or reduce the symptoms of a mental disorder

**Electroconvulsive therapy:** Electric shock

**Group therapy:** meeting with people with similar problems/run by a trained counselor.

**Behavioral therapy:** gets patients to change unwanted habits or behaviors through rewards and punishment. Relaxation techniques can also be used.

**Cognitive Therapy:** treatment method designed to identify and correct distorted thinking patterns that can lead to feelings and behaviors that may be troublesome, self-defeating or self-destructive.

**Play therapy:** with children

**Psychodrama and role reversal:** with couples

**Hospitalization**

*Mental Health Professions*

**Neurologist:** Physician who specializes in organic disorders of the CNS; i.e.; brain tumors

**Psychiatrist:** a physician who specializes in diagnosing and treating mental disorders and can prescribe medicine.

**Clinical Psychologist:** diagnoses andtreats emotional and behavioral disorders by means of counseling but cannot prescribe medicine.

**Counselors:** peer counseling, educational (guidance), pastoral.

**Social workers:** provides guidance and treatment for clients with emotional problems, usually in a mental hospital, mental health clinic, school or service agency.

**Occupational therapist:** evaluates a person’s abilities in the light of his or her emotional or physical handicap